

**TESTIMONY OF  
Yale-New Haven Children's Hospital  
Submitted to the  
Public Health Committee  
Monday, March 16, 2009**

**HB 6678, An Act Concerning Revisions to Department of Public Health Licensing Statutes**

Yale-New Haven Children's Hospital (YNHCH) appreciates the opportunity to submit testimony in support of sections 14 and 15 of HB 6678 regarding inter-hospital Neonatal and Pediatric Specialty Care Transport. As one of the State's two children's hospitals, YNHCH has a robust transport service which safely performs procedures in children that are more technically demanding than in adults. The two children's hospitals provide the highest level of newborn intensive care; the only full-service pediatric intensive care units; the only Level 1 trauma care service; and provide more than 90% of all high acuity specialty services (cardiac surgery, neurosurgery and oncology) to children in Connecticut.

Yale-New Haven has safely operated neonatal and pediatric intra-hospital transport programs for more than 25 years. Depending on the needs of the patient, the YNHCH transport teams include a complement of highly trained clinical staff including Transport Registered Nurses (RN), Advanced Practice Registered Nurse (APRN) or fellow; Newborn Special Care or Pediatric Intensive Care RNs that have been specially trained to participate in transport; Respiratory Therapists (as needed), as well as telephone supervision by an attending neonatologist or intensivist (MDs).

Last year, our highly trained clinical teams safely transported over 400 newborns and children. Yale-New Haven Children's Hospital's Newborn Special Care Team transported 206 newborns between 28 hospitals in Connecticut, Massachusetts, Rhode Island, New York and Pennsylvania. Newborns are most commonly transferred for extreme prematurity, cardio-pulmonary failure and congenital abnormalities. YNHCH's Pediatric Intensive Care Team transported 208 children between 24 hospitals in Connecticut, Rhode Island and New York. Children were most commonly transferred for Level 1 trauma, respiratory failure, shock and seizures (neurological disorders).

This critically important service requires the availability of rapidly responding teams of qualified caregivers 24 hours a day, 365 days a year. Our teams capably manage a wide range of life-threatening conditions and perform life-saving procedures including:

- Endotracheal intubation;
- Vascular access;
- Mechanical ventilation; and
- Tube thoracostomy.

Reliable service requires ground transportation and staff that are adequately trained, supervised and available. We urge your support of the language contained in sections 14 & 15 of HB 6678 which seeks to codify training requirements of clinical teams that assist in the safe inter-hospital transportation of newborns and children.

Thank you for your consideration.